Attendance Roster

Michigan Department of Licensing and Regulatory Affairs
Bureau of Fire Services
Office of Fire Fighter Training
P.O. Box 30700
Lansing, MI 48909
517-241-8847

Authority: 1966 PA 291

COURSE NAME		COURSE NUMBER
SUBJECT		LEVEL
Assigned ·····D=B·· Number	Student Names (Type or Print)	Student Signatures
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Assigned PIN Number	Student Names (Type or Print)	Student Signatures
	the curriculum objectives for the portion of the subject covered on this	s date have been taught.
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START TIM	E	
END TIME		CERTIFIED INSTRUCTOR'S SIGNATURE
тте ⊔ераπтепт от Law} • а́ with reading, writing, hearin	* & U^* jatt : 'AL는case will not discriminate against any individual or group because of race, s ig, etc., under the Americans with Disabilities Act, you may make your needs known to this ag	sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need hel gency. Á Á

BFS-200 (5/07) (Formerly BCCFS-200) Back